

Arizona Department of Health Services
Bureau of Emergency Medical Services
UNOFFICIAL PROPOSED RULES
JULY 3, 2003

The official ADHS/BEMS *Proposed Rules* have been filed with and published in the
Arizona Administrative Register by the Office of the Arizona Secretary of State.

PROPOSED RULEMAKING
TITLE 9. HEALTH SERVICES
CHAPTER 25. DEPARTMENT OF HEALTH SERVICES
EMERGENCY MEDICAL SERVICES

ARTICLE 1. DEFINITIONS

R9-25-101. Definitions (Authorized by A.R.S. §§ 36-2201, 36-2202, 36-2204, 36-2205)

In Articles 1 through 4 of this Chapter, unless the context otherwise requires:

1. "Administrative medical direction" has the meaning in A.R.S. § 36-2201.
2. "Administrative medical director" means an individual qualified under R9-25-204 who provides administrative medical direction as required under R9-25-204.
3. "Advanced procedure" means an emergency medical service provided by an EMT that:
 - a. Requires skill or training beyond the basic skills or training prescribed in the Arizona EMT-B course as defined in R9-25-305; or
 - b. Is designated in A.R.S. Title 36, Chapter 21.1 or this Chapter as requiring medical direction.
4. "ALS base hospital" means the same as "advanced life support base hospital" in A.R.S. § 36-2201.
5. "Ambulance service" has the meaning in A.R.S. § 36-2201.
6. "Centralized medical direction communications center" has the meaning in A.R.S. § 36-2201.
7. "Chief administrative officer" means an individual assigned to act on behalf of an ALS base hospital or a training program certified under Article 3 of this Chapter by the body organized to govern and manage the ALS base hospital or the training program.
8. "Clinical training" means to provide an individual with experience and instruction in providing direct patient care in a health care institution.
9. "Communication protocol" means a written guideline prescribing:
 - a. How an EMT shall:
 - i. Request and receive on-line medical direction;

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- ii. Notify an on-line physician before arrival of an EMT's intent to transport a patient to a health care institution; and
 - iii. Notify a health care institution before arrival of an EMT's intent to transport a patient to the health care institution; and
 - b. What procedures an EMT shall follow in a communications equipment failure.
10. "Conspicuously post" means to make visible to patients and other individuals by displaying on an object, such as a wall or bulletin board.
 11. "Course content outline" means a sequential listing of subject matter, objectives, skills, and competencies to be taught or tested.
 12. "Dangerous drug" has the meaning in A.R.S. § 13-3401.
 13. "Day" means a calendar day.
 14. "Department" means the Arizona Department of Health Services.
 15. "Drug" has the meaning in A.R.S. § 32-1901.
 16. "Document" or "documentation" means signed and dated information in written, photographic, electronic, or other permanent form.
 17. "Electronic signature" has the meaning in A.R.S. § 41-351.
 18. "EMT" means the same as "certified emergency medical technician" in A.R.S. § 36-2201.
 19. "EMT-B" means the same as "basic emergency medical technician" in A.R.S. § 36-2201.
 20. "EMT-I" means the same as "intermediate emergency medical technician" in A.R.S. § 36-2201.
 21. "EMT-P" means the same as "emergency paramedic" in A.R.S. § 36-2201.
 22. "Emergency medical services" has the meaning in A.R.S. § 36-2201.
 23. "Emergency medical services provider" has the meaning in A.R.S. § 36-2201.
 24. "Field training" means to provide an individual with emergency medical services experience and training outside of a health care institution or a training program facility.
 25. "General hospital" has the meaning in R9-10-201.
 26. "Health care institution" has the meaning in A.R.S. § 36-401.
 27. "Medical direction" means administrative medical direction or on-line medical direction.
 28. "Medical record" has the meaning in A.R.S. § 36-2201.
 29. "Narcotic drug" has the same meaning as "narcotic drugs" in A.R.S. § 13-3401.

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- 30. "NREMT" means the National Registry of Emergency Medical Technicians.
- 31. "On-line medical direction" means emergency medical services guidance or information provided to an EMT by an on-line physician through two-way voice communication.
- 32. "On-line physician" means an individual qualified under R9-25-205 who provides on-line medical direction as required under R9-25-205.
- 33. "Patient" means an individual who is sick, injured, or wounded and who requires medical monitoring, medical treatment, or transport.
- 34. "Person" has the meaning in A.R.S. § 1-215.
- 35. "Physician" has the meaning in A.R.S. § 36-2201.
- 36. "Prehospital incident history report" has the meaning in A.R.S. § 36-2220(E).
- 37. "Proficiency in advanced emergency cardiac life support" means:
 - a. Completion of 16 clock hours of organized training covering:
 - i. Electrocardiographic rhythm interpretation;
 - ii. Oral, tracheal, and nasal airway management;
 - iii. Nasotracheal intubation and surgical cricothyrotomy;
 - iv. Peripheral and central intravenous lines; and
 - v. Pharmacologic, mechanical, and electrical arrhythmia interventions; and
 - b. Every 24 months after meeting the requirement in subsection (a), completion of additional training covering the subject matter listed in subsection (a).
- 38. "Proficiency in advanced trauma life support" means:
 - a. Completion of 16 clock hours of organized training covering:
 - i. Rapid and accurate patient assessment,
 - ii. Patient resuscitation and stabilization,
 - iii. Patient transport or transfer, and
 - iv. Patient treatment and care; and
 - b. Every 48 months after meeting the requirement in subsection (a), completion of additional training covering the subject matter listed in subsection (a).
- 39. "Proficiency in cardiopulmonary resuscitation" means:
 - a. Completion of eight clock hours of organized training covering:

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- i. Adult and pediatric resuscitation,
 - ii. Rescuer scenarios and use of a bag-valve mask,
 - iii. Adult and child foreign-body airway obstruction in conscious and unconscious patients,
 - iv. Automated external defibrillation,
 - v. Special resuscitation situations, and
 - vi. Common cardiopulmonary emergencies; and
 - b. Every 24 months after meeting the requirement in subsection (a), completion of additional training covering the subject matter listed in subsection (a).
40. "Proficiency in pediatric emergency care" means:
- a. Completion of 16 clock hours of organized training covering:
 - i. Pediatric rhythm interpretation;
 - ii. Oral, tracheal, and nasal airway management;
 - iii. Nasotracheal intubation and surgical cricothyrotomy;
 - iv. Peripheral and central intravenous lines;
 - v. Intraosseous infusion;
 - vi. Needle thoracostomy; and
 - vii. Pharmacologic, mechanical, and electrical arrhythmia interventions; and
 - b. Every 24 months after meeting the requirement in subsection (a), completion of additional training covering the subject matter listed in subsection (a).
41. "Standing order" means a treatment protocol or triage protocol that authorizes an EMT to act without on-line medical direction.
42. "Supervise" or "supervision" means the same as "supervision" in A.R.S. § 36-401.
43. "Treatment protocol" means a written guideline that prescribes:
- a. How an EMT shall perform a medical treatment on a patient or administer a drug to a patient; and
 - b. When on-line medical direction is required, if the protocol is not a standing order.
44. "Triage protocol" means a written guideline that prescribes:
- a. How an EMT shall:

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- i. Assess and prioritize the medical condition of a patient,
- ii. Select a health care institution to which a patient may be transported, and
- iii. Transport a patient to a health care institution; and
- b. When on-line medical direction is required, if the protocol is not a standing order.

ARTICLE 2. MEDICAL DIRECTION; ALS BASE HOSPITAL CERTIFICATION

R9-25-201. Required Medical Direction (A.R.S. §§ 36-2201, 36-2202(A)(3) and (A)(4), 36-2204(5), (6), and (7) and 36-2205(A) and (E))

- A. An EMT-B authorized to perform an advanced procedure shall not perform an advanced procedure unless the EMT has administrative medical direction and is able to receive on-line medical direction.
- B. An EMT-I or EMT-P shall not act as an EMT-I or EMT-P unless the EMT has administrative medical direction and is able to receive on-line medical direction.
- C. An emergency medical services provider or an ambulance service shall ensure that an EMT acting as an EMT for the emergency medical services provider or the ambulance service has administrative medical direction and is able to receive on-line medical direction, if required in subsections (A) or (B).

R9-25-202. General Requirements for Provision of Administrative Medical Direction (A.R.S. §§ 36-2201, 36-2202(A)(3) and (A)(4), 36-2204(5), (6), and (7), 36-2204.01, and 36-2205(A) and (E))

An emergency medical services provider, an ambulance service, an ALS base hospital, or a centralized medical direction communications center that provides administrative medical direction shall:

- 1. Provide administrative medical direction:
 - a. Through an administrative medical director qualified under R9-25-204, and
 - b. As required in R9-25-204;
- 2. Maintain for Department review:
 - a. The name, address, and telephone number of each administrative medical director;

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- b. Documentation that an administrative medical director is qualified under R9-25-204; and
 - c. Policies, procedures, protocols, and documentation required under R9-25-204;
- 3. Notify the Department in writing no later than ten days after the date the emergency medical services provider, ambulance service, ALS base hospital, or centralized medical direction communications center providing administrative medical direction to an EMT:
 - a. Withdraws the EMT's administrative medical direction, or
 - b. Reinstates the EMT's administrative medical direction; and
- 4. Notify the Department in writing no later than ten days after the date the emergency medical services provider, ambulance service, ALS base hospital, or centralized medical direction communications center providing administrative medical direction to an EMT becomes aware that the EMT:
 - a. Is incarcerated for a criminal conviction or is on parole for a criminal conviction, supervised release for a criminal conviction, or probation for a criminal conviction;
 - b. Is convicted of a crime listed in R9-25-402(A)(2), a felony, or a misdemeanor involving moral turpitude in this state or any other state or jurisdiction;
 - c. Is convicted of a misdemeanor identified in R9-25-403(A) in this state or any other state or jurisdiction;
 - d. Has registration revoked or suspended by NREMT; or
 - e. Has EMT certification, recertification, or licensure revoked or suspended in another state or jurisdiction.

R9-25-203. General Requirements for Provision of On-line Medical Direction (A.R.S. §§ 36-2201, 36-2202(A)(3) and (A)(4), 36-2204(5), (6), and (7), 36-2204.01, and 36-2205(A) and (E))

- A. An emergency medical services provider, an ambulance service, an ALS base hospital, or a centralized medical direction communications center that provides on-line medical direction shall:
 - 1. Provide on-line medical direction:

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- a. Through an on-line physician qualified under R9-25-205, and
 - b. As required in R9-25-205; and
 - 2. Maintain for Department review:
 - a. The name, address, and telephone number of each on-line physician; and
 - b. Documentation that an on-line physician is qualified under R9-25-205.
 - B. An emergency medical services provider, an ambulance service, an ALS base hospital, or a centralized medical direction communications center that provides on-line medical direction shall:
 - 1. Have operational and accessible communication equipment that will allow an on-line physician to give on-line medical direction.
 - 2. Have a written plan for alternative communications with an EMT in the event of disaster, communication equipment breakdown or repair, power outage, or malfunction; and
 - 3. Have an on-line physician qualified under R9-25-205 available to give on-line medical direction to an EMT 24 hours a day, seven days a week.
- R9-25-204. Administrative Medical Director Qualifications and Responsibilities (A.R.S. §§ 36-2201, 36-2202(A)(3) and (A)(4), 36-2204(5), (6), and (7), and 36-2204.01)**
- A. An individual shall not act as an administrative medical director unless the individual:
 - 1. Is a physician; and
 - 2. Meets one of the following:
 - a. Has emergency medicine certification from a specialty board recognized by the Arizona Medical Board or the Arizona Board of Osteopathic Examiners in Medicine and Surgery;
 - b. Has completed an emergency medicine residency training program accredited by the Accreditation Council for Graduate Medical Education or approved by the American Osteopathic Association; or
 - c. Is practicing emergency medicine and has:
 - i. Proficiency in advanced emergency cardiac life support,
 - ii. Proficiency in advanced trauma life support, and
 - iii. Proficiency in pediatric emergency care.

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- B. An administrative medical director shall act only on behalf of:
1. An emergency medical services provider;
 2. An ambulance service;
 3. An ALS base hospital certified under this Article;
 4. A centralized medical direction communications center; or
 5. An EMT-B pursuant to A.R.S. § 36-2202(J).
- C. An administrative medical director:
1. Shall coordinate the provision of administrative medical direction to EMTs, and
 2. May delegate responsibilities to an individual as necessary to fulfill the requirements in this Section, if the individual is:
 - a. A physician;
 - b. Licensed under A.R.S. Title 32, Chapter 15 or Chapter 25; or
 - c. An EMT-I or EMT-P.
- D. An administrative medical director shall:
1. Ensure that an EMT receives administrative medical direction as required under A.R.S. Title 36, Chapter 21.1 and 9 A.A.C. 25;
 2. Approve, ensure implementation of, and annually review treatment protocols, triage protocols, and communications protocols for an EMT to follow that are consistent with:
 - a. A.R.S. Title 36, Chapter 21.1 and 9 A.A.C. 25; and
 - b. The EMT's scope of practice as identified under Article 8 of this Chapter;
 3. Approve, ensure implementation of, and annually review policies and procedures that an EMT shall follow for medical recordkeeping, medical reporting, and completion and processing of prehospital incident history reports that are consistent with:
 - a. A.R.S. Title 36, Chapter 21.1 and 9 A.A.C. 25; and
 - b. The EMT's scope of practice as identified under Article 8 of this Chapter;
 4. Approve, ensure implementation of, and annually review policies and procedures governing the administrative medical direction of an EMT, including policies and procedures for:

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- a. Monitoring and evaluating an EMT 's compliance with treatment protocols, triage protocols, and communications protocols;
 - b. Monitoring and evaluating an EMT's compliance with medical recordkeeping, medical reporting, and prehospital incident history report requirements;
 - c. Monitoring and evaluating an EMT 's performance as authorized by the EMT's scope of practice as identified under Article 8 of this Chapter;
 - d. Ensuring that an EMT receives ongoing education, training, or remediation necessary to promote ongoing professional competency and compliance with EMT standards of practice established in R9-25-410;
 - e. Withdrawing an EMT's administrative medical direction;
 - f. Reinstating an EMT's administrative medical direction; and
 - g. Determining whether an applicant for EMT recertification is required to pass a written examination required under A.R.S. § 36-2202(G); and
5. Approve, ensure implementation of, and annually review policies and procedures for a quality assurance process to evaluate the effectiveness of the administrative medical direction provided to EMTs.
- E. An administrative medical director shall:
- 1. Annually document that the administrative medical director has reviewed A.R.S. Title 36, Chapter 21.1 and 9 A.A.C. 25; and
 - 2. Ensure that an individual to whom the administrative medical director delegates authority to fulfill the requirements in this Section annually documents that the individual has reviewed A.R.S. Title 36, Chapter 21.1 and 9 A.A.C. 25.
- R9-25-205. On-line Physician Qualifications and Responsibilities (A.R.S. §§ 36-2202(A)(3) and (A)(4), 36-2204(5), (6), and (7), and 36-2204.01)**
- A. An individual shall not act as an on-line physician unless the individual:
- 1. Is a physician; and
 - 2. Meets one of the following:

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- a. Has emergency medicine certification from a specialty board recognized by the Arizona Medical Board or the Arizona Board of Osteopathic Examiners in Medicine and Surgery;
 - b. Has completed an emergency medicine residency training program accredited by the Accreditation Council for Graduate Medical Education or approved by the American Osteopathic Association; or
 - c. Is practicing emergency medicine and has:
 - i. Proficiency in advanced emergency cardiac life support,
 - ii. Proficiency in advanced trauma life support, and
 - iii. Proficiency in pediatric emergency care.
- B. An individual shall act as an on-line physician only on behalf of:
- 1. An emergency medical services provider,
 - 2. An ambulance service,
 - 3. An ALS base hospital certified under this Article, or
 - 4. A centralized medical direction communications center.
- C. An on-line physician shall give on-line medical direction to an EMT:
- 1. As required under A.R.S. Title 36, Chapter 21.1 and 9 A.A.C. 25;
 - 2. Consistent with the EMT's scope of practice as identified under Article 8 of this Chapter;
 - 3. Consistent with treatment protocols, triage protocols, and communication protocols approved by the EMT's administrative medical director; and
 - 4. Consistent with medical recordkeeping, medical reporting, and prehospital incident history report requirements approved by the EMT's administrative medical director.
- D. An on-line physician may allow an individual acting under the supervision of the on-line physician to relay on-line medical direction, if the individual is:
- 1. A physician;
 - 2. Licensed under A.R.S. Title 32, Chapter 15 or Chapter 25; or
 - 3. An EMT-I or EMT-P.
- R9-25-206. Centralized Medical Direction Communications Center (A.R.S. §§ 36-2201, 36-2202(A)(3) and (A)(4), and 36-2204.01)**

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- A. Pursuant to A.R.S. § 36-2204.01, an emergency medical services provider or an ambulance service may provide centralized medical direction by:
 - 1. Solely operating one or more centralized medical direction communications centers;
 - 2. Joining with one or more emergency medical services providers or ambulance services to operate one or more centralized medical direction communications centers; or
 - 3. Entering into an agreement with one or more centralized medical direction communications centers to provide medical direction to EMTs acting as EMTs for the emergency medical services provider or the ambulance service.
- B. For the purposes of A.R.S. § 36-2201(7), a "freestanding communications center":
 - 1. May be housed within one or more physical facilities, and
 - 2. Is not limited to a single physical location.
- C. For the purposes of A.R.S. § 36-2201(7)(b), a centralized medical direction communications center shall be "staffed" if an on-line physician qualified under R9-25-205 is available to give on-line medical direction to an EMT 24 hours a day, seven days a week.

R9-25-207. ALS Base Hospital General Requirements (Authorized by A.R.S. §§ 36-2201, 36-2202(A)(3) and (A)(4), and 36-2204(5), (6), and (7))

- A. A person shall not operate as an ALS base hospital without certification from the Department.
- B. The Department shall not certify an ALS base hospital if:
 - 1. Within five years before the date of filing an application required by this Article, the Department has decertified the ALS base hospital; or
 - 2. The applicant knowingly provides false information on or with an application required by this Article.
- C. The Department shall certify an ALS base hospital if the applicant:
 - 1. Is not ineligible for certification under subsection (B);
 - 2. Is licensed as a general hospital under 9 A.A.C. 10, Article 2 or is a general hospital operated in this state by the United States federal government or by a sovereign tribal nation;
 - 3. Has at least one written agreement that meets the requirements of A.R.S. § 36-2201(2); and

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4. Meets the application requirements in R9-25-208.
- D. An ALS base hospital certificate is valid only for the name and address listed by the Department on the certificate.
- E. An ALS base hospital certificate holder shall:
 1. Conspicuously post the original or a copy of the ALS base hospital certificate in the emergency room lobby or emergency room reception area of the ALS base hospital; and
 2. Return an ALS base hospital certificate to the Department immediately upon decertification by the Department pursuant to R9-25-211 or upon voluntarily ceasing to act as an ALS base hospital.
- F. Every 24 months after certification, the Department shall inspect, pursuant to A.R.S. § 41-1009, an ALS base hospital to determine ongoing compliance with the requirements of this Article.
- G. The Department may inspect, pursuant to A.R.S. § 41-1009, an ALS base hospital:
 1. As part of the substantive review time-frame required in A.R.S. §§ 41-1072 through 41-1079; or
 2. As necessary to determine compliance with the requirements of this Article.

R9-25-208. Application Requirements for ALS Base Hospital Certification (Authorized by A.R.S. §§ 36-2201, 36-2202(A)(3) and (A)(4), and 36-2204(5))

- A. An applicant for ALS base hospital certification shall submit to the Department an application including:
 1. An application form provided by the Department containing:
 - a. The applicant's name, address, and telephone number;
 - b. The name and telephone number of the applicant's chief administrative officer;
 - c. The name, address, and telephone number of each administrative medical director;
 - d. The name, address, and telephone number of each on-line physician;
 - e. Attestation that the applicant meets the communication requirements in R9-25-203(B);
 - f. Attestation that the applicant will comply with all requirements in A.R.S. Title 36, Chapter 21.1 and 9 A.A.C. 25;

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- g. Attestation that all information required as part of the application has been submitted and is true and accurate; and
 - h. The signature or electronic signature of the applicant's chief administrative officer or the chief administrative officer's designated representative and date of signature or electronic signature;
 - 2. A copy of the applicant's current general hospital license issued under 9 A.A.C. 10, Article 2, if applicable; and
 - 3. A copy of each executed written agreement, including all attachments and exhibits, described in A.R.S. § 36-2201(2).
- B. The Department shall approve or deny an application under this Section pursuant to Article 12 of this Chapter.

R9-25-209. Amendment of an ALS Base Hospital Certificate (Authorized by A.R.S. §§ 36-2201, 36-2202(A)(3) and (A)(4), and 36-2204(5) and (6))

- A. No later than 10 days after the date of a change in the name listed on the ALS base hospital certificate, an ALS base hospital certificate holder shall submit to the Department an application form provided by the Department containing:
- 1. The new name and the effective date of the name change;
 - 2. Attestation that all information submitted to the Department is true and correct; and
 - 3. The signature or electronic signature of the applicant's chief administrative officer or the chief administrative officer's designated representative and date of signature or electronic signature.
- B. No later than 10 days after the date of a change in the address listed on an ALS base hospital certificate or a change of ownership, as defined in R9-10-101, an ALS base hospital certificate holder shall submit to the Department an application required in R9-25-208(A).
- C. The Department shall approve or deny an application under this Section pursuant to Article 12 of this Chapter.

R9-25-210. ALS Base Hospital Authority and Responsibilities (Authorized by A.R.S. §§ 36-2201, 36-2202(A)(3) and (A)(4), and 36-2204(5) and (6))

- A. An ALS base hospital certificate holder shall:

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1. Provide both administrative medical direction and on-line medical direction;
 2. Comply with the requirements in R9-25-202, R9-25-203, R9-25-204, and R9-25-205;
 3. Ensure that personnel are available to provide:
 - a. Administrative medical direction as required in R9-25-204, and
 - b. On-line medical direction as required in R9-25-205; and
 4. Provide administrative medical direction and on-line medical direction to each EMT pursuant to a written agreement that meets the requirements of A.R.S. § 36-2201(2).
- B. An ALS base hospital certificate holder shall:
1. No later than 24 hours after ceasing to meet the requirement in R9-25-207(C)(2) or R9-25-207(C)(3), notify the Department in writing; and
 2. No later than 48 hours after terminating, adding, or amending a written agreement required in R9-25-207(C)(3), notify the Department in writing and, if applicable, submit to the Department a copy of the new or amended written agreement that meets the requirements of R9-25-207(C)(3).
- C. An ALS base hospital may act as a training program without training program certification from the Department, if the ALS base hospital:
1. Is eligible for training program certification pursuant to R9-25-301(C); and
 2. Complies with the requirements in R9-25-301(I) and R9-25-304 through R9-25-318.
- R9-25-211. ALS Base Hospital Enforcement Actions (Authorized by A.R.S. §§ 36-2201, 36-2202(A)(3) and (A)(4), and 36-2204(7))**
- A. The Department may take an action listed in subsection (B) against an ALS base hospital certificate holder who:
1. Does not meet the certification requirements in R9-25-207(C)(2) or R9-25-207(C)(3);
 2. Violates the requirements in A.R.S. Title 36, Chapter 21.1 or 9 A.A.C. 25; or
 3. Intentionally or negligently provides false documentation or information to the Department.
- B. The Department may take the following action against an ALS base hospital certificate holder:
1. After notice is provided pursuant to A.R.S. Title 41, Chapter 6, Article 10, issue a letter of censure,

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2. After notice is provided pursuant to A.R.S. Title 41, Chapter 6, Article 10, issue an order of probation,
3. After notice and an opportunity to be heard is provided pursuant to A.R.S. Title 41, Chapter 6, Article 10, suspend the ALS base hospital certificate, or
4. After notice and an opportunity to be heard is provided pursuant to A.R.S. Title 41, Chapter 6, Article 10, decertify the ALS base hospital.

ARTICLE 3. TRAINING PROGRAMS

R9-25-301. Definitions ; Training Program General Requirements (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. In this Article:
1. "Course" means the:
 - a. Arizona EMT-B course, defined in R9-25-305;
 - b. Arizona EMT-B refresher, defined in R9-25-306;
 - c. Arizona EMT-I course, defined in R9-25-307;
 - d. Arizona EMT-P course, defined in R9-25-308; or
 - e. Arizona ALS refresher, defined in R9-25-309; and
 2. "Refresher challenge examination" means the:
 - a. Arizona EMT-B refresher challenge examination, defined in R9-25-306; or
 - b. Arizona ALS refresher challenge examination, defined in R9-25-309.
- B. A person shall not provide or offer to provide a course or refresher challenge examination without training program certification from the Department.
- C. The Department shall not certify a training program, if:
1. Within five years before the date of filing an application required in R9-25-302, the Department has decertified a training program operated by the applicant; or
 2. The applicant knowingly provides false information on or with an application required by this Article.
- D. The Department shall certify a training program, if the applicant:

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1. Is not ineligible for certification pursuant to subsection (C); and
 2. Meets the application requirements in R9-25-302.
- E. A training program certificate is valid only for the name, address, and courses listed by the Department on the certificate.
- F. A training program certificate holder shall:
1. Maintain with an insurance company authorized to transact business in this state:
 - a. A minimum single claim professional liability insurance coverage of \$500,000; and
 - b. A minimum single claim general liability insurance coverage of \$500,000 for the operation of the training program; or
 2. Be self-insured for the amounts in subsection (F)(1).
- G. A training program certificate holder shall:
1. Conspicuously post the original or a copy of the training program certificate in the training program administrative office;
 2. Return the training program certificate to the Department upon decertification by the Department pursuant to R9-25-317 or upon voluntarily ceasing to act as a training program; and
 3. Not transfer the training program certificate to another person.
- H. Every 24 months after certification, the Department shall inspect, pursuant to A.R.S. § 41-1009, a training program to determine ongoing compliance with the requirements of this Article.
- I. The Department may inspect, pursuant to A.R.S. § 41-1009, a training program:
1. As part of the substantive review time-frame required in A.R.S. §§ 41-1072 through 41-1079; or
 2. As necessary to determine compliance with the requirements of this Article.
- J. The Department shall approve or deny an application under this Article pursuant to Article 12 of this Chapter.

R9-25-302. Application Requirements for Training Program Certification Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

An applicant for training program certification shall submit to the Department an application including:

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1. An application form provided by the Department containing:
 - a. The applicant's name, address, and telephone number;
 - b. The name and telephone number of the applicant's chief administrative officer;
 - c. The name of each course the applicant will provide;
 - d. Attestation that the applicant will comply with all requirements in A.R.S. Title 36, Chapter 21.1 and 9 A.A.C. 25;
 - e. Attestation that all information required as part of the application has been submitted and is true and accurate; and
 - f. The signature or electronic signature of the applicant's chief administrative officer or the chief administrative officer's designated representative and date of signature or electronic signature;
2. A copy of a certificate of insurance or proof of self-insurance required in R9-25-301(F);
3. For each training program medical director, documentation that the individual is qualified under R9-25-310;
4. For each training program director, documentation that the individual is qualified under R9-25-311;
5. For each lead instructor, documentation that the individual is qualified under R9-25-312;
6. If required under R9-25-304(B), a copy of each executed agreement, including all attachments and exhibits, for clinical training and field training;
7. For each course to be provided, copies of policies and procedures required in R9-25-313;
8. For each course to be provided, copies of disclosure statements required in R9-25-314;
9. For each course to be provided, a completed form provided by the Department verifying that the applicant will develop, administer, and grade a final written course examination, a final comprehensive practical skills examination, or a refresher challenge examination that meets the requirements established for the course; and
10. For each course to be provided, a completed form provided by the Department verifying that the applicant has:
 - a. Equipment that meets equipment requirements established for the course; and
 - b. Facilities that meet facility requirements established for the course.

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R9-25-303. Amendment of a Training Program Certificate (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. No later than 10 days after a change in the name or address listed on a training program certificate, the training program certificate holder shall submit to the Department an application form provided by the Department containing:
1. The new name or new address and the date of the name or address change;
 2. Attestation that the current insurance required in R9-25-301(F) is valid for the new name or new address;
 3. Attestation that all information submitted to the Department is true and correct; and
 4. The signature or electronic signature of the applicant's chief administrative officer or the chief administrative officer's designated representative and date of signature or electronic signature.
- B. Before providing a course not listed by the Department on a training program certificate, a training program certificate holder shall submit to the Department an application for the new course that includes the information in R9-25-302.

R9-25-304. Course Requirements (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. For each course provided, a training program certificate holder shall:
1. Designate a training program medical director qualified under R9-25-310 and ensure that the training program medical director fulfills all responsibilities established in R9-25-310;
 2. Designate a training program director qualified under R9-25-311 and ensure that the training program director fulfills all responsibilities established in R9-25-311;
 3. Assign a lead instructor qualified under R9-25-312;
 4. Ensure that clinical training and field training are provided under the supervision of a preceptor qualified under R9-25-312;
 5. Meet all requirements that are established for the course as prescribed in this Article;
 6. For clinical training in the course, have a maximum ratio of 4 students to 1 preceptor or instructor;

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7. For field training in the course, have a maximum ratio of 1 student to 1 preceptor or instructor; and
 8. Allow a student no more than six months from the official course completion date to complete all course requirements.
- B. For a course's clinical training or field training that is not provided directly by a training program, the training program shall have a written agreement between the training program and each health care institution, emergency medical services provider, or ambulance service providing the training that:
1. Requires that all training be provided under the supervision of a preceptor qualified under R9-25-312; and
 2. Contains a termination clause that provides sufficient time for students to complete the training upon termination of the agreement.
- C. A certified training program authorized to provide the Arizona EMT-B refresher may administer an Arizona EMT-B refresher challenge examination to an individual eligible for admission into the Arizona EMT-B refresher. The certified training program shall limit the individual to one attempt to pass the Arizona EMT-B refresher challenge examination.
- D. A certified training program authorized to provide the Arizona ALS refresher may administer an Arizona ALS refresher challenge examination to an individual eligible for admission into the Arizona ALS refresher. The certified training program shall limit the individual to one attempt to pass the Arizona ALS refresher challenge examination.

R9-25-305. Arizona EMT-B Course (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. "Arizona EMT-B course" means the United States Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Technician-Basic: National Standard Curriculum (1994);
1. Incorporated by reference and on file with the Department and the Office of the Secretary of State, including no future editions or amendments; and available from the National Highway Traffic Safety Administration, 400 Seventh Street, SW, Washington, DC

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- 20590; from the Department's Bureau of Emergency Medical Services; and on the Internet at <http://www.nhtsa.dot.gov/people/injury/ems/nsc.htm>
2. Modified in subsection (B); and
 3. Provided by a training program certified under this Article or by an ALS base hospital authorized under R9-25-210(C).
- B. The Arizona EMT-B course is modified as follows:
1. No more than 24 students shall be enrolled in the course;
 2. Prerequisites listed on page 14 and on pages 1-3, 1-11, 1-21, 1-28, 1-41, 1-49, 1-62, 2-4, 2-18, 2-22, 3-3, 3-9, 3-16, 3-24, 3-30, 3-38, 3-45, 3-55, 3-63, 3-69, 4-2, 4-9, 4-20, 4-35, 4-43, 4-51, 4-59, 4-71, 4-81, 4-93, 4-99, 5-3, 5-14, 5-25, 5-34, 5-49, 5-55, 6-3, 6-18, 6-22, 7-3, 7-12, 7-19, 7-26 are required;
 3. The minimum course length is 110 contact hours;
 4. Modules 1 through 7 are required;
 5. Module 8 is deleted;
 6. EMS equipment listed on pages 1-3, 1-11, 1-21, 1-29, 1-42, 1-49, 1-62, 2-4, 2-18, 2-22, 3-3, 3-9, 3-17, 3-25, 3-31, 3-39, 3-55, 3-63, 3-69, 4-9, 4-21, 4-35, 4-43, 4-51, 4-59, 4-71, 4-81, 4-93, 4-99, 5-3, 5-14, 5-25, 5-34, 5-49, 5-55, 6-3, 6-19, 6-22, 7-3, 7-13, 7-19, 7-27 is required and shall be available before the start of the course and during the course as needed to meet the needs of each student enrolled in the course;
 7. Facility recommendations on page 22 and 23 are requirements;
 8. In addition to modules 1 through 7, the course shall also contain additional instruction and skills training in:
 - a. Blood glucose monitoring that provides information and hands-on training on the equipment and procedures necessary to evaluate blood sugar levels, and
 - b. Intravenous monitoring that provides information and hands-on training on transporting a patient with an established intravenous or patient controlled analgesic pump.
 9. A final written course examination is required and shall:

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- a. Include 150 multiple-choice questions with one absolutely correct answer, one incorrect answer, and two distractors, neither of which is "all of the above" or "none of the above";
 - b. Cover the learning objectives of the course with representation from each of the course modules; and
 - c. Require a passing score of 75% or better in three attempts; and
10. A final comprehensive practical skills examination is required and shall meet NREMT-Basic Practical Examination standards.

R9-25-306. Arizona EMT-B Refresher, Arizona EMT-B Refresher Challenge Examination
(Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. "Arizona EMT-B refresher" means the United States Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Technician: Basic Refresher Curriculum (1994);
- 1. Incorporated by reference and on file with the Department and the Office of the Secretary of State, including no future editions or amendments; and available from the National Highway Traffic Safety Administration, 400 Seventh Street, SW, Washington, DC 20590; from the Department's Bureau of Emergency Medical Services; and on the Internet at <http://www.nhtsa.dot.gov/people/injury/ems/nsc.htm>
 - 2. Modified in subsection (B); and
 - 3. Provided by a training program certified under this Article or by an ALS base hospital authorized under R9-25-210(C).
- B. The Arizona EMT-B refresher is modified as follows:
- 1. No more than 32 students shall be enrolled in the course;
 - 2. The minimum admission requirements are:
 - a. One of the following:
 - i. Current EMT-B or higher level certification in this state or certification, recertification, or licensure at the basic emergency medical technician level or higher level in any other state or jurisdiction;
 - ii. Current NREMT-Basic or higher level registration; or

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- iii. For an individual with lapsed NREMT-Basic or higher-level registration, eligibility to have NREMT registration reinstated upon completion of the Arizona EMT-B refresher; and
 - b. Proficiency in cardiac pulmonary resuscitation;
 - 3. The minimum course length is 24 contact hours;
 - 4. Modules 1 through 6 are required;
 - 5. EMS equipment listed on pages I-2, II-2, III-3, IV-3, V-2, and VI-2 is required and shall be available before the start of the course and during the course as needed to meet the needs of each student enrolled in the course;
 - 6. Facility recommendations on page ix are requirements;
 - 7. For a student who has not completed the Arizona EMT-B course, the course shall contain additional instruction and skills training in:
 - a. Blood glucose monitoring that provides information and hands-on training on the equipment and procedures necessary to evaluate blood sugar levels, and
 - b. Intravenous monitoring that provides information and hands-on training on transporting a patient with an established intravenous or patient controlled analgesic pump;
 - 8. A final written course examination is required and shall:
 - 1. Include 150 multiple-choice questions with one absolutely correct answer, one incorrect answer, and two distractors, neither of which is "all of the above" or "none of the above";
 - 2. Cover the learning objectives of the course with representation from each of the course modules; and
 - 3. Require a passing score of 75% or better in three attempts; and
 - 9. A final comprehensive practical skills examination is required and shall meet NREMT-Basic Practical Examination standards.
- C. "Arizona EMT-B refresher challenge examination" means competency testing prescribed in the Arizona EMT-B refresher that is administered by a training program certified under this Article or by an ALS base hospital authorized under R9-25-210(C).

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- D. The Arizona EMT-B refresher challenge examination shall consist of:
1. The EMT-B refresher final written course examination, required in subsection (B)(8); and
 2. The EMT-B refresher final comprehensive practical skills examination, required in subsection (B)(9).
- E. The written final course examination and the final comprehensive practical skills examination administered to an individual as part of the Arizona EMT-B Refresher Challenge Examination shall be comparable in all respects, including content, structure, and difficulty, to an examination administered to an individual enrolled in the Arizona EMT-B Refresher.

R9-25-307. Arizona EMT-I Course (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. "Arizona EMT-I course" means the United States Department of Transportation, National Highway Traffic Safety Administration, EMT-Intermediate: National Standard Curriculum (1999);
1. Incorporated by reference and on file with the Department and the Office of the Secretary of State, including no future editions or amendments; and available from the National Highway Traffic Safety Administration, 400 Seventh Street, SW, Washington, DC 20590; from the Department's Bureau of Emergency Medical Services; and on the Internet at <http://www.nhtsa.dot.gov/people/injury/ems/nsc.htm>
 2. Modified in subsection (B); and
 3. Provided by a training program certified under this Article or by an ALS base hospital authorized under R9-25-210(C).
- B. The Arizona EMT-I course is modified as follows:
1. No more than 24 students shall be enrolled in the course;
 2. Prerequisites listed on page 16 of 27 are required;
 3. The minimum course length is 400 contact hours, including:
 - a. A minimum of 280 contact hours of didactic instruction and practical laboratory, and
 - c. A minimum of 120 contact hours of clinical training and field training;
 4. Modules 1 through 7 are required;

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5. EMS equipment required for the course is listed in Exhibit A and shall be available before the start of the course and during the course as needed to meet the needs of each student enrolled in the course;
6. Facility recommendations on page 23 of 27 are requirements;
7. A final written course examination is required and shall:
 - a. Include 150 multiple-choice questions with one absolutely correct answer, one incorrect answer, and two distractors, neither of which is "all of the above" or "none of the above";
 - b. Cover the learning objectives of the course with representation from each of the course modules; and
 - c. Require a passing score of 75% or better in three attempts; and
8. A final comprehensive practical skills examination is required and shall meet NREMT-Intermediate Practical Examination standards.

R9-25-308. Arizona EMT-P Course (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. "Arizona EMT-P course" means the United States Department of Transportation, National Highway Traffic Safety Administration, EMT-Paramedic: National Standard Curriculum (1998);
 1. Incorporated by reference and on file with the Department and the Office of the Secretary of State, including no future editions or amendments; and available from the National Highway Traffic Safety Administration, 400 Seventh Street, SW, Washington, DC 20590; from the Department's Bureau of Emergency Medical Services; and on the Internet at <http://www.nhtsa.dot.gov/people/injury/ems/nsc.htm>
 2. Modified in subsection (B); and
 3. Provided by a training program certified under this Article or by an ALS base hospital authorized under R9-25-210(C).
- B. The Arizona EMT-P course is modified as follows:
 1. No more than 24 students shall be enrolled in the course;
 2. The following course prerequisites are required:
 - a. Prerequisites listed on pages 20 and 21 of the introductory material; and

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- b. Completion of a minimum of 24 clock hours of hazardous materials training that meets the requirements of the National Fire Protection Association's, NFPA 472: Standard for Professional Competence of Responders to Hazardous Materials Incidents, 2002 Edition; Competencies for First Responders at the Operational Level; incorporated by reference and on file with the Department and the Office of the Secretary of State, including no future editions or amendments; and available from the National Fire Protection Association, 1 Batterymarch Park, Quincy, MA 02169-747 and from the Department's Bureau of Emergency Medical Services;
- 3 The minimum course length is 1000 contact hours, including:
 - a. A minimum of 500 contact hours of didactic instruction and practical laboratory, and
 - b. A minimum of 500 contact hours of clinical training and field training.
- 4 Modules 1 through 8 are required;
- 5. Equipment required for the course is listed in Exhibit A and shall be available before the start of the course and during the course as needed to meet the needs of each student enrolled in the course;
- 6. Facility recommendations on page 31 of the introductory material are requirements;
- 7. A final written course examination is required and shall:
 - 1. Include 150 multiple-choice questions with one absolutely correct answer, one incorrect answer, and two distractors, neither of which is "all of the above" or "none of the above";
 - 2. Cover the learning objectives of the course with representation from each of the course modules; and
 - 3. Require a passing score of 75% or better in three attempts; and
- 8. A final comprehensive practical skills examination is required and shall meet NREMT-Paramedic Practical Examination standards.

R9-25-309. Arizona ALS Refresher; Arizona ALS Refresher Challenge Examination
(Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

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- A. "Arizona ALS refresher" means the means the United States Department of Transportation, National Highway Traffic Safety Administration, EMT-Paramedic: NSC Refresher Curriculum (2001);
1. Incorporated by reference and on file with the Department and the Office of the Secretary of State, including no future editions or amendments; and available from the National Highway Traffic Safety Administration, 400 Seventh Street, SW, Washington, DC 20590; from the Department's Bureau of Emergency Medical Services; and on the Internet at <http://www.nhtsa.dot.gov/people/injury/ems/nsc.htm>
 2. Modified in subsection (B); and
 3. Provided by a training program certified under this Article or by an ALS base hospital authorized under R9-25-210(C).
- B. The Arizona ALS refresher is modified as follows:
1. No more than 32 students shall be enrolled in the course;
 2. The minimum admission requirements are:
 - a. One of the following:
 - i. Current EMT-I or EMT-P certification in this state or certification, recertification, or licensure at the intermediate emergency medical technician level or higher level in any other state or jurisdiction;
 - ii. Current NREMT-Intermediate or NREMT-Paramedic registration; or
 - iii. For an individual with lapsed NREMT-Intermediate or NREMT-Paramedic registration, eligibility to have NREMT registration reinstated upon completion of the Arizona ALS refresher; and
 - b. Proficiency in cardiac pulmonary resuscitation and proficiency in advanced emergency cardiac life support;
 3. The minimum course length is 48 contact hours;
 4. Modules 1 through 6 are required;
 5. For a student at the intermediate emergency medical technician level, lessons, tasks, and objectives shall not exceed the intermediate emergency medical technician skill level;

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6. Equipment required for the course is listed in Exhibit A and shall be available before the start of the course and during the course as needed to meet the needs of each student enrolled in the course;
 7. Facility recommendations identified for the Arizona EMT-P course are requirements;
 8. A final written course examination is required and shall:
 - a. Include 150 multiple-choice questions with one absolutely correct answer, one incorrect answer, and two distractors, neither of which is "all of the above" or "none of the above";
 - b. Cover the learning objectives of the course with representation from each of the course modules; and
 - c. Require a passing score of 75% or better in three attempts; and
 9. A final comprehensive practical skills examination is required and shall meet:
 - a. For a student with competency at the intermediate emergency medical technician level, the NREMT-Intermediate Practical Examination standards;
 - b. For a student with competency at the paramedic emergency medical technician level, the NREMT-Paramedic Practical Examination standards.
- C. "Arizona ALS refresher challenge examination" means competency testing prescribed in the Arizona ALS refresher that is administered by a training program certified under this Article or by an ALS base hospital authorized under R9-25-210(C).
- D. The Arizona ALS refresher challenge examination shall consist of:
1. The ALS refresher final written course examination, required in subsection (B)(8); and
 2. The ALS refresher final comprehensive practical skills examination, required in subsection (B)(9).
- E. The final written course examination and the final comprehensive practical skills examination administered to an individual as part of the Arizona ALS Refresher Challenge Examination shall be comparable in all respects, including content, structure, and difficulty, to an examination administered to an individual enrolled in the Arizona ALS Refresher.
- R9-25-310. Training Program Medical Director (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))**

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- A. A training program medical director shall:
 - 1. Be a physician or exempt from physician licensing requirements under A.R.S. §§ 32-1421(A)(7) or 32-1821(3); and
 - 2. Meet one of the following:
 - a. Have emergency medicine certification from a specialty board recognized by the Arizona Medical Board or the Arizona Board of Osteopathic Examiners in Medicine and Surgery;
 - b. Have completed an emergency medicine residency training program accredited by the Accreditation Council for Graduate Medical Education or approved by the American Osteopathic Association; or
 - c. Be practicing emergency medicine and have:
 - i. Proficiency in advanced emergency cardiac life support,
 - ii. Proficiency in advanced trauma life support, and
 - iii. Proficiency in pediatric emergency care.
- B. A training program medical director designated for a course shall:
 - 1. Before the start date of the course, ensure that the course has a course content outline and final examinations that are consistent with:
 - a. Requirements established in the course; and
 - b. The scope of practice of the EMT level to which the course corresponds; and
 - 2. During the course, ensure that the course content outline is followed and that the final examinations are given.

R9-25-311. Training Program Director (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. A training program director shall be:
 - 1. A physician with at least two years emergency medical services experience as a physician;
 - 2. A doctor of allopathic medicine or osteopathic medicine licensed in another state or jurisdiction with at least two years emergency medical services experience as a doctor of allopathic medicine or osteopathic medicine;

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3. A registered nurse licensed under A.R.S. Title 32, Chapter 15 or licensed in another state or jurisdiction with at least two years emergency medical services experience as a registered nurse;
 4. A physician's assistant licensed under A.R.S. Title 32, Chapter 25 or licensed in another state or jurisdiction with at least two years emergency medical services experience as a physician's assistant;
 5. An EMT-P with at least two years experience as an EMT-P;
 6. An EMT-I with at least two years experience as an EMT-I, only if acting as a training program director for the Arizona EMT-I course, EMT-I Arizona ALS refresher, Arizona EMT-B course, or Arizona EMT-B refresher; or
 7. An EMT-B with at least two years experience as an EMT-B, only if acting as a training program director for the Arizona EMT-B course or Arizona EMT-B refresher.
- B. A training program director designated for a course shall:
1. Supervise the day-to-day operation of a course;
 2. Supervise and evaluate the course lead instructor and all preceptors providing clinical training or field training;
 3. Ensure that policies and procedures established for a course pursuant to R9-25-313 are followed;
 4. Ensure that true and accurate records for each student enrolled in a course are kept pursuant to R9-25-315;
 5. Ensure that an Arizona EMT-B refresher challenge examination or an Arizona ALS refresher challenge examination is administered and graded pursuant to the requirements established in the Arizona EMT-B refresher or the Arizona ALS refresher;
 6. Ensure that a student is assisted in making reservations to take NREMT written examinations required for NREMT registration;
 7. Ensure that a student is assisted in completing application forms required for NREMT registration;
 8. Ensure that a student is assisted in completing application forms required for certification in this state;

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9. Ensure that forms required pursuant to R9-25-316(B) or (C) are completed and submitted to the Department;
 10. For a student who completes a course, issue a certificate of completion containing:
 - a. Identification of the training program;
 - b. The name of the course completed;
 - c. The name of the student who completed the course;
 - d. The date the student completed all course requirements;
 - e. Attestation that the student has met all course requirements; and
 - f. The signature or electronic signature of the training program director and the date of signature or electronic signature; and
 11. For an EMT who passes the Arizona EMT-B refresher challenge examination or the Arizona ALS refresher challenge examination, issue a certificate of completion containing:
 - a. Identification of the training program;
 - b. The name of the refresher challenge examination administered;
 - c. The name of the EMT who passed the refresher challenge examination;
 - d. The dates the EMT took the refresher challenge examination;
 - e. Attestation that the EMT has passed the refresher challenge examination; and
 - f. The signature or electronic signature of the training program director and the date of signature or electronic signature.
- R9-25-312. Lead Instructor; Preceptor (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))**
- A. A lead instructor shall be:
1. A physician with at least two years emergency medical services experience;
 2. A doctor of allopathic medicine or osteopathic medicine licensed in another state or jurisdiction with at least two years emergency medical services experience;
 3. A registered nurse licensed under A.R.S. Title 32, Chapter 15 or licensed in another state or jurisdiction with at least two years emergency medical services experience;

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4. A physician's assistant licensed under A.R.S. Title 32, Chapter 25 or licensed in another state or jurisdiction with at least two years emergency medical services experience;
 5. An EMT-P with at least two years experience as an EMT-P;
 6. An EMT-I with at least two years experience as an EMT-I, only if acting as a lead instructor for the Arizona EMT-I course, EMT-I Arizona ALS refresher, Arizona EMT-B course, or Arizona EMT-B refresher; or
 7. An EMT-B with at least two years experience as an EMT-B, only if acting as a lead instructor for the Arizona EMT-B course or Arizona EMT-B refresher.
- B. A lead instructor shall have completed 24 hours of training in instructional methodology including:
1. Organizing and preparing materials for didactic instruction, clinical training, field training, and skills practice;
 2. Preparing and administering tests and practical examinations;
 3. Using equipment and supplies;
 4. Measuring student performance;
 5. Evaluating student performance;
 6. Providing corrective feedback; and
 7. Evaluating course effectiveness.
- C. A lead instructor assigned to a course shall:
1. Be present or have a substitute lead instructor present during all course hours established for the course; and
 2. Ensure that course instruction is provided and is consistent with the course content outline and final examinations established for the course.
- D. A preceptor shall be:
1. A physician or a doctor of allopathic medicine or osteopathic medicine licensed in another state or jurisdiction;
 2. A registered nurse licensed under A.R.S. Title 32, Chapter 15 or licensed in another state or jurisdiction;

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3. A physician's assistant licensed under A.R.S. Title 32, Chapter 25 or licensed in another state or jurisdiction;
 4. An EMT-P with at least two years experience as an EMT-P;
 5. An EMT-I with at least two years experience as an EMT-I, only if acting as a preceptor for the Arizona EMT-I course, an EMT-I Arizona ALS refresher, the Arizona EMT-B course, or the Arizona EMT-B refresher; or
 6. An EMT-B with at least two years experience as an EMT-B, only if acting as a preceptor for the Arizona EMT-B course or Arizona EMT-B refresher.
- E. A preceptor shall provide training consistent with the clinical training or field training established in a course and, if applicable, a written agreement required in R9-25-304(B).

R9-25-313. Training Program Policies and Procedures (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

A training program certificate holder shall establish, implement, and annually review policies and procedures for:

1. Student enrollment, including verification that a student has proficiency in reading at the 9th grade level and meets all course admission requirements;
2. Student attendance, including leave, absences, make-up work, tardiness, and causes for suspending or expelling a student for unsatisfactory attendance;
3. Grading, including the minimum grade average considered satisfactory for continued enrollment and causes for suspending or expelling a student for unsatisfactory grades;
4. Administration of final examinations;
5. Student conduct, including causes for suspending or expelling a student for unsatisfactory conduct; and
6. Maintenance of student records and medical records, including compliance with all applicable state and federal laws governing confidentiality, privacy, and security.

R9-25-314. Training Program Disclosure Statements (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

A training program certificate holder shall provide all course applicants with the following documentation before the start date of a course:

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1. A description of requirements for admission, course content, course hours, course fees, and course completion;
2. A list of books, equipment, and supplies that a student is required to purchase for the course;
3. Notification of requirements for a student to begin any part of the course, including physical examinations, immunizations, tuberculin skin tests, drug screening, and the ability to perform certain physical activities;
4. A copy of training program policies and procedures required under R9-25-313;
5. A copy of Article 4 of this Chapter; and
6. A copy of NREMT policies and requirements governing:
 - a. NREMT practical and written examinations, and
 - b. NREMT registration.

R9-25-315. Training Program Student Records (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. A training program certificate holder shall keep the following records for each student enrolled in a course:
 1. The student's name;
 2. A copy of the student's enrollment agreement or contract;
 3. The name of the course in which the student is enrolled;
 4. The student's attendance records;
 5. The student's clinical training records;
 6. The student's field training records;
 7. The student's grades;
 8. Documentation of scores for each final written examination attempted or completed by the student; and
 9. Documentation of each final practical examination attempted or completed by the student, including all forms used as part of the final practical examination.
- B. A training program certificate holder shall retain student records required under subsection (A) for three years from the start date of a student's course.

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- C. A training program certificate holder shall keep records for each EMT to whom a refresher challenge examination is administered, including:
1. The EMT's name;
 2. The challenge examination taken;
 3. The challenge examination date;
 4. The final written examination attempted or completed by the student and the written examination numeric grade; and
 5. Documentation of each practical examination attempted or completed by the student, including all forms used as part of the practical examination.
- D. A training program certificate holder shall retain records required under subsection (C) for three years from the date a refresher challenge examination is administered.

R9-25-316. Training Program Notification; Reporting; and Recordkeeping (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. At least 10 days before the start date of a course, a training program certificate holder shall submit to the Department a completed form provided by the Department containing:
1. Identification of the training program,
 2. The course name,
 3. The name of the course training program medical director and attestation that the course training program medical director is qualified under R9-25-310,
 4. The name of the course training program director and attestation that the course training program director is qualified under R9-25-311,
 5. The name of the course lead instructor and attestation that the lead instructor is qualified under R9-25-312,
 6. The course start date and end date, and
 7. The main location at which the course will be taught.
- B. No later than 10 days after the date a student completes all course requirements, a training program certificate holder shall submit to the Department, the following information on a completed form provided by the Department:
1. Name, start date, and end date of the course completed;

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2. Name, social security number, and mailing address of the student who has completed the course;
 3. Date the student completed all course requirements; and
 4. Signed and dated attestation of the training program director designated for a course that the student has met all course requirements.
- C. No later than 10 days after the date a certified training program administers a refresher challenge examination, the training program certificate holder shall submit to the Department a completed form provided by the Department containing:
1. Identification of the refresher challenge examination administered;
 2. Name, social security number, and address of the EMT who passed the refresher challenge examination;
 3. Refresher challenge examination date; and
 4. Signed and dated attestation of the training program director designated for a course that the EMT has passed the refresher challenge examination.
- D. A training program certificate holder shall maintain for Department review and inspection all documents and records as required under this Article.

R9-25-317. Training Program Enforcement Actions (Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and (3))

- A. The Department may take an action listed in subsection (B) against a training program certificate holder who:
1. Violates the requirements in A.R.S. Title 36, Chapter 21.1 or 9 A.A.C. 25; or
 2. Intentionally or negligently provides false documentation or information to the Department.
- B. The Department may take the following action against a training program certificate holder:
1. After notice is provided pursuant to A.R.S. Title 41, Chapter 6, Article 10, issue a letter of censure;
 2. After notice is provided pursuant to A.R.S. Title 41, Chapter 6, Article 10, issue an order of probation;

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3. After notice and opportunity to be heard is provided pursuant to A.R.S. Title 41, Chapter 6, Article 10, suspend the training program certificate; or
4. After notice and opportunity to be heard is provided pursuant to A.R.S. Title 41, Chapter 6, Article 10, decertify the training program.

**R9-25-318. Arizona EMT-I Transition Course Definition; Clarification of EMT-I
References(Authorized by A.R.S. §§ 36-2202(A)(3) and (A)(4) and 36-2204(1) and
(3))**

- A. In addition to the definitions of "course" in R9-25-301(A), course also means the Arizona EMT-Intermediate Transition Course:
 1. Prescribed in Exhibit B; and
 2. Provided by a training program certified under this Article 3 or by an ALS base hospital authorized under R9-25-210(C).
- B. Under R9-25-309(B):
 1. "Intermediate emergency medical technician level or higher level" means completion of training that meets or exceeds the training provided in the United States Department of Transportation, National Highway Traffic Safety Administration, EMT-Intermediate: National Standard Curriculum (1999), incorporated by reference in R9-25-307(A)(1); and
 2. "EMT-Intermediate registration" means EMT-Intermediate/99 registration granted by NREMT.
- C. Under R9-25-309(B), R9-25-311(A)(6), and R9-25-312(A)(6), "EMT-I" means an EMT-I who has completed training that meets or exceeds the training provided in the United States Department of Transportation, National Highway Traffic Safety Administration, EMT-Intermediate: National Standard Curriculum (1999), incorporated by reference in R9-25-307(A)(1).
- D. Under R9-25-311(A)(6) and R9-25-312(A)(6), an EMT-I may also act as a training program director or lead instructor for the Arizona EMT-Intermediate Transition Course, prescribed in Exhibit B.
- E. In this Article "NREMT-Intermediate Practical Examination " means the NREMT-Intermediate Practical Examination required for EMT-Intermediate/99 registration granted by NREMT.

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F. This Section expires December 31, 2007.

Exhibit A

**EMT-I Course, EMT-P Course, ALS Refresher
Equipment Minimum Standards**

Quantity?	Equipment?
1?	Moulage or Casualty Simulation Equipment?
12?	Trauma Dressings?
1 per student?	Pen Lights (or provided by the student)?
1 per student?	Scissors (or provided by the student)?
4?	Stethoscopes (or provided by the student)?
4?	Blood pressure cuffs - adult sizes?
4?	Blood pressure cuffs - child size?
4?	Bag-valve-mask devices - adult size?
4?	Bag-valve-mask devices - pediatric size?
2?	Oxygen tank with regulator and key (Must be operational and maintain a minimum of 500psi.)?
6?	Oxygen masks non-rebreather - adult?
6?	Oxygen masks non-rebreather - child?
6?	Nasal cannulas?
2 boxes?	Alcohol preps?
One box per student?	Gloves - (small, medium, large, and extra large) (each student has one box of an appropriate size available during the course)?
6 packages?	4x4 sponges (non sterile)?
10 boxes?	5x9 sponges (non sterile)?
36 rolls?	Roller gauze (non sterile)?
1 box?	Vaseline gauze or occlusive dressings?
2?	Traction splint devices?
2?	Vest type immobilization devices?
2?	Long spine boards with securing devices?
3 of each size?	Cervical collars (small, regular, medium, large, and extra large) NOTE: may substitute 06 adjustable devices NOTE: Soft collars and foam types are not acceptable?
2?	Head immobilization materials/devices?
1?	Ambulance stretcher?
1?	Bottle of activated charcoal?
1?	Oral glucose tube?
2?	Blood glucose monitoring devices?
2?	IV solution, tubing: macro and microdrip, blood tubing?
2?	Portable suction devices?

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3?	Rigid suction catheters?
3?	Flexible suction catheters?
2 of each size?	Oropharyngeal airways?
2 of each size?	Nasopharyngeal airways?
2 of each size?	Rigid splints (6 inch, 12 inch, 18 inch, 24 inch, and 36 inch)?
2?	Burn sheets?
2?	OB kits?
8 bottles?	Sterile water?
2?	CPR Manikins - adult?
2?	CPR Manikins - child?
2?	CPR Manikins - infant?
1 per student?	CPR face shields or similar barrier device (or provided by the student)?
1 per student?	Pocket mask (or provided by the student)?
1?	Semi-Automatic Defibrillator or AED training device?
1 box?	IV Catheter - Butterfly?
1 box?	IV Catheter - 24 Gauge?
1 box?	IV Catheter - 22 Gauge?
1 box?	IV Catheter - 20 Gauge?
1 box?	IV Catheter - 18 Gauge?
1 box?	IV Catheter - 16 Gauge?
1 box?	IV Catheters central line catheter or intra-cath?
1 unit?	Monitor/Defibrillator?
1 unit?	Arrhythmia Simulator?
1 box?	Electrodes?
2 unit?	Intubation Manikin-adult?
2 unit?	Intubation Manikin - pediatrics?
2 sets?	Laryngoscope Handle and Blades - 1 complete set MAC or Miller?
1 set?	Endotracheal Tubes - 3.5, 4.0, 4.5, 5.0, 5.5, 6.0, 6.5, 7.0, 7.5, 8.0, and 8.5?
1 ?	Dual Lumen Airway?
2 each?	Stylet - adult and pediatric ?
1 box?	1 cc Syringes?
1 box?	3 cc Syringes?
1 box?	5 cc Syringes?
1 box?	10-12 cc Syringes?
1 box?	20 cc Syringes?
2?	IV Infusion Arm?
10 bags?	IV Fluids:50cc, 100cc, 250cc, 500cc, 1000cc?
10 sets each?	IV Tubing - 10/15gtt, 60gtt?
10 sets each?	Blood tubing?
2?	Sharps containers?

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1?	Invasive Skills Manikin - cricothyrotomy, central Lines and intraosseous and sternal IO training devices?
1?	Magill forceps?
1?	Hemostat?
3?	IV tourniquets?
3?	Scalpels?
1?	Simulated Drug Box?

EXHIBIT B

Arizona EMT-Intermediate Transition Course

Admission Requirements:

1. Current EMT-I certification in Arizona,
2. Evidence of proficiency in cardiac pulmonary resuscitation;
3. Evidence of proficiency in advanced emergency cardiac life support;

Course Hours:

The minimum course length is 80 contact hours. In addition, sufficient time shall be provided to administer the final written examination and the final practical examination.

Equipment and Facilities:

Equipment required for the course is listed in Exhibit A and shall be available before the start of the course and during the course as needed to meet the needs of each student enrolled in the course. Facility recommendations identified for the Arizona EMT-P course are requirements for the Arizona EMT-Intermediate Transition Course.

Examinations:

1. A final written course examination is required and shall:
 - a. Include 150 multiple-choice questions with 1 absolutely correct answer, 1 incorrect answer, and 2 distractors, neither of which is "all of the above" or "none of the above;"
 - b. Cover the learning objectives of the course with representation from each of the course modules; and
 - c. Require a passing score of 75% or better in three attempts.
2. A final comprehensive practical skills examination is required and shall meet NREMT-Intermediate/99 Practical Examination standards.

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Competencies:

1. Describe the scope of the duties of the advanced emergency medical technician (Intermediate and Paramedic). (I)
2. Identify signs and symptoms of patients with a communicable disease and list the appropriate body substance isolation procedures. (I)
3. Identify the initial, focused, and continuing processes of assessment, medical history, vital signs, communications, and documentation. (II)
4. Apply the procedures of identifying and treating hypoperfusion states including intravenous (IV) and intraosseous (IO) fluid therapy. (III, IV)
5. Describe the actions, indications, contraindications, precautions, side effects, and dosages of the drugs included in the current Arizona Department of Health Services, Bureau of Emergency Medical Services approved drug box. (IV)
6. Given a patient scenario, identify and treat emergencies and relate proposed field interventions for each of the body systems. (V)
7. Given a patient scenario, identify and relate proposed field interventions for patient with obstetrical emergencies. (VI)
8. Given a patient scenario, identify and relate proposed field interventions for patient with neonatal and pediatric emergencies. (VII)
9. Given a scenario, identify and relate proposed field interventions for patient with behavioral emergencies, preserving personal safety and well being. (VIII)
10. Demonstrate trauma victim assessment, airway management, control of hemorrhage and hypoperfusion states. (IX)
11. Demonstrate 80 percent proficiency on a written examination and 80 percent accuracy of practical skills in selected EMS scenarios. (X)

Course Outline:

- I. Advanced Emergency Medical Technician
 - A. Roles and responsibilities
 - B. Rules, regulations, and EMS systems
- II. Human Systems and Patient Assessment

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- A. Scene management and body substance isolation
 - B. Human systems in health and disease
 - C. Initial, focused, and ongoing processes of assessment
 - 1. Vital signs
 - 2. History taking, interviewing, and communications
 - 3. Terminology
 - D. Documentation
- III. Hypoperfusion States
- A. Shock/Disorders of hydration
 - B. Devices and techniques
 - C. Trauma
 - E. Thermal injuries
 - F. Communications and documentation
- IV. Pharmacology
- A. Basic and advanced pharmacokinetics
 - B. Updated drug information
 - C. Action of drugs
 - D. Techniques of administration
 - 1. Oral
 - 2. Rectal
 - 3. Parenteral
 - 4. Intraosseous
 - 5. Intralingual
 - E. Drug box
- V. Illness, Injury, and the Body's Systems
- A. Respiratory
 - 1. LMA
 - 2. Combitube
 - 3. Endotracheal and nasal tracheal intubation

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- 4. Surgical cricothyrotomy
- 5. Needle thoracostomy
- B. Cardiovascular
 - 1. Ecg rhythm identification
 - 2. Pacemaker rhythm identification
 - 3. 12-lead ecg application and analysis
 - 4. Defibrillation and cardioversion procedures
- C. Central nervous system
- D. Endocrine
- E. Musculoskeletal emergencies
- F. Soft tissue emergencies
- G. Acute abdominal emergencies
- H. Genito-urinary emergencies
- I. Gynecological emergencies
- J. Anaphylactic reactions
- K. Toxicology, alcoholism, and substance abuse
- L. Poisoning and overdose
- M. Submersion incidents
- N. Emergencies in the geriatric patient
- O. Techniques of management
- P. Communications and documentation
- VI. Obstetrical Emergencies
 - A. Maternal assessment
 - B. Delivery techniques
 - C. Care of the newborn
 - D. Ectopic pregnancy
 - E. Infectious diseases
 - F. Rape and abuse
 - G. Communications and documentation

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- VII. Neonatal and Pediatric Emergencies
 - A. Approach to the pediatric patient
 - B. Related pathologies
 - C. Techniques of management
 - D. Communications and documentation
- VIII. Behavioral Emergencies
 - A. Behavioral disorders
 - B. Hostile environments
 - C. Therapeutic communications
 - D. Restraint
- IX. Trauma and Disaster
 - A. START Triage
 - B. Incident command
 - C. Age considerations
 - 1. Infant
 - 2. Pediatric
 - 3. Adult
 - 4. Geriatric
- X. Evaluation
 - A. Written
 - B. Skills

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ARTICLE 4. EMT CERTIFICATION

R9-25-401. EMT General Requirements (Authorized by A.R.S. §§ 36-2202(A)(2), (A)(3) and (A)(6), 36-2202(G), 36-2204(1), (6) and (7), and 36-2211)

- A. An individual shall not act as an EMT-B, EMT-I, or EMT-P unless the individual has current certification or recertification from the Department.
- B. The Department shall approve or deny an application required by this Article pursuant to Article 12 of this Chapter.
- C. If the Department denies an application for certification or recertification, the applicant may request a hearing pursuant to A.R.S. Title 41, Chapter 6, Article 10.
- D. The Department shall certify or recertify an EMT for two years:
 - 1. Except as provided in R9-25-405; or
 - 2. Unless revoked by the Department pursuant to A.R.S. § 36-2211.
- E. An individual whose EMT certificate is expired shall not apply for recertification, unless the individual has been granted an extension to file an application for EMT recertification under R9-25-407.
- F. An individual whose EMT certificate is expired or denied by the Department may apply for certification pursuant to R9-25-404, or if applicable, R9-25-405.
- G. The Department shall keep confidential all criminal justice information received from the Department of Public Safety or any local, state, tribal, or federal law enforcement agency and shall not make this information available for public record review.

R9-25-402. EMT Certification and Recertification Requirements (Authorized by A.R.S. §§ 36-2202(A)(2), (A)(3) and (A)(6), 36-2202(G), 36-2204(1), (6) and (7), and 36-2211)

- A. The Department shall not certify an EMT if the applicant:
 - 1. Is currently:
 - a. Incarcerated for a criminal conviction,
 - b. On parole for a criminal conviction,
 - c. On supervised release for a criminal conviction, or
 - d. On probation for a criminal conviction;

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2. Within 10 years before the date of filing an application for certification required by this Article, has been convicted of any of the following crimes, or any similarly defined crimes in this state or in any other state or jurisdiction, unless the conviction has been absolutely discharged, expunged, or vacated:
 - a. 1st or 2nd degree murder;
 - b. Attempted 1st or 2nd degree murder;
 - c. Sexual assault;
 - d. Attempted sexual assault;
 - e. Sexual abuse of a minor;
 - f. Attempted sexual abuse of a minor;
 - g. Sexual exploitation of a minor;
 - h. Attempted sexual exploitation of a minor;
 - i. Commercial sexual exploitation of a minor;
 - j. Attempted commercial sexual exploitation of a minor;
 - k. Molestation of a child;
 - l. Attempted molestation of a child; or
 - m. A dangerous crime against children as defined in A.R.S. § 13-604.01;
 3. Within five years before the date of filing an application for certification required by this Article, has been convicted of a felony or of a misdemeanor involving moral turpitude in this state or any other state or jurisdiction, other than a felony or a misdemeanor involving moral turpitude listed in subsection (A)(2), unless the conviction has been absolutely discharged, expunged, or vacated;
 4. Within five years before the date of filing an application for certification required by this Article, has had EMT certification or recertification revoked in this state or EMT certification, recertification, or licensure revoked in any other state or jurisdiction; or
 5. Knowingly provides false information in connection with an application required by this Article.
- B. The Department shall not recertify an EMT, if:

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1. While certified, the applicant has been convicted of a crime listed in subsection (A)(2), or any similarly defined crimes in this state or in any other state or jurisdiction, unless the conviction has been absolutely discharged, expunged, or vacated; or
 2. The applicant knowingly provides false information in connection with an application required by this Article.
- C. The Department shall certify or recertify an EMT who:
1. Is at least 18 years of age;
 2. Is not ineligible for:
 - a. Certification pursuant to subsection (A), or
 - b. Recertification pursuant to subsection (B); and
 3. Meets the applicable requirements in R9-25-404, R9-25-405, or R9-25-406.
- R9-25-403. EMT Probationary Certification (Authorized by A.R.S. §§ 36-2202(A)(2) and (A)(3), 36-2202(G), 36-2204(1), (6) and (7), and 36-2211)**
- A. The Department shall make probation a condition of certification under R9-25-404 or temporary certification under R9-25-405, if within two years before the date of filing an application for certification required by this Article, an applicant who is not ineligible for certification under R9-25-402 has been convicted of a misdemeanor in this state or in any other state or jurisdiction, involving:
1. Possession, use, administration, acquisition, sale, manufacture, or transportation of an intoxicating liquor, dangerous drug, or narcotic drug, unless the conviction has been absolutely discharged, expunged, or vacated; or
 2. Driving or being in physical control of a vehicle while under the influence of an intoxicating liquor, a dangerous drug, or a narcotic drug, unless the conviction has been absolutely discharged, expunged, or vacated.
- B. The Department shall fix the period and terms of probation that will:
1. Protect the public health and safety, and
 2. Remediate and educate the applicant.
- R9-25-404. Application Requirements for Initial EMT Certification (Authorized by A.R.S. §§ 36-2202(A)(2) and (A)(3), 36-2202(G), and 36-2204(1) and (6))**

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- A. An applicant for initial EMT certification shall submit to the Department an application including:
1. An application form provided by the Department containing:
 - a. The applicant's name, address, telephone number, date of birth, and social security number;
 - b. Responses to questions addressing the applicant's criminal history pursuant to R9-25-402(A) and R9-25-403(A);
 - c. Attestation that all information required as part of the application has been submitted and is true and accurate; and
 - d. The applicant's signature and date of signature;
 2. For each affirmative response to a question addressing the applicant's criminal history pursuant to R9-25-402(A) or R9-25-403(A), a detailed explanation and supporting documentation; and
 3. If applicable, a copy of EMT certification, recertification, or licensure issued to the applicant in another state or jurisdiction.
- B. In addition to the application, the following are required:
1. For EMT-B certification, both:
 - a. A certificate of course completion signed by the training program director designated for the course for either the:
 - i. Arizona EMT-B course, or
 - ii. Arizona BLS refresher, if the applicant has current certification, licensure, NREMT registration, or NREMT reregistration eligibility at the basic emergency medical technician level or higher level; and
 - b. Current NREMT-Basic registration;
 2. For EMT-I certification, both:
 - a. A certificate of course completion signed by the training program director designated for the course for either the:
 - i. Arizona EMT-I course, or

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- ii. Arizona ALS refresher, if the applicant has current certification, licensure, NREMT registration, or NREMT reregistration eligibility at the intermediate emergency medical technician level or higher level; and
- b. Current NREMT-Intermediate registration; or
- 3. For EMT-P certification, both:
 - a. A certificate of course completion signed by the training program director designated for the course for either the:
 - i. Arizona EMT-P course, or
 - ii. Arizona ALS refresher, if the applicant has current certification, licensure, NREMT registration, or NREMT reregistration eligibility at the paramedic emergency medical technician level; and
 - b. Current NREMT-Paramedic registration.

R9-25-405. Application Requirements for Temporary Nonrenewable EMT-B or EMT-P Certification (Authorized by A.R.S. §§ 36-2202(A)(2) and (A)(3), 36-2202(G), and 36-2204(1), (6) and (7))

- A. An individual who holds current NREMT-Basic registration, but does not meet requirements in R9-25-404(B)(1)(a), may apply for one temporary six-month EMT-B certification.
- B. An individual who holds current NREMT-Paramedic registration, but does not meet application requirements in R9-25-404(B)(3)(a), may apply for one temporary six-month EMT-P certification.
- C. An applicant for temporary certification shall submit to the Department a copy of current NREMT registration and an application required in R9-25-404(A).
- D. The Department shall certify an applicant who meets certification requirements under this Section for six months.
- E. The Department shall automatically certify an EMT who holds a six month certificate for an additional 18 months, if the EMT:
 - 1. Continues to hold current NREMT-Basic registration or current NREMT-Paramedic registration; and

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2. Before the expiration of the six month certificate, meets the applicable application requirements in R9-25-404(B).
- F. The Department shall issue an EMT who complies with subsection (E) a new certificate that expires 24 months from the date the six month certificate is issued.
- G. An EMT who is not certified under subsection (E):
1. Shall not act as an EMT after the expiration date of the six month certificate,
 2. Is not eligible to apply for another six month certificate under this Section,
 3. Shall not apply for recertification, and
 4. May apply for certification pursuant to R9-25-404.
- R9-25-406. Application Requirements for EMT Recertification (Authorized by A.R.S. §§ 36-2202(A)(2), (A)(3) and (A)(6), 36-2202(G), and 36-2204(1), (4), and (6))**
- A. Before the expiration of the applicant's current certificate, an applicant for EMT recertification shall submit to the Department an application including:
1. An application form provided by the Department containing:
 - a. The applicant's name, address, tele phone number, date of birth, and social security number;
 - b. Responses to questions addressing the applicant's criminal history pursuant to R9-25-402(A)(3), R9-25-402(B)(1), and R9-25-411(A);
 - c. Attestation that all information required as part of the application has been submitted and is true and accurate; and
 - d. The applicant's signature and date of signature;
 2. For each affirmative response to a question addressing the applicant's criminal history pursuant to R9-25-402(A)(3), R9-25-402(B)(1), and R9-25-411(A), a detailed explanation and supporting documentation; and
 3. If applicable, a copy of each EMT certification, recertification, or licensure issued to the applicant in another state or jurisdiction that the applicant holds.
- B. In addition to the application, the following are required:
1. For EMT-B recertification, either:

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- a. A certificate of course completion signed by the training program director designated for the course showing that within two years before the expiration date of an applicant's current EMT-B certificate, the applicant completed either the:
 - i. Arizona EMT-B refresher, or
 - ii. Arizona EMT-B refresher challenge examination; or
 - b. Current NREMT-Basic registration;
- 2. For EMT-I recertification, either:
 - a. Attestation that the applicant:
 - i. Has completed continuing education required under subsection (C), and
 - ii. Has and will maintain for Department review documentation verifying completion of continuing education required under subsection (C); or
 - b. Current NREMT-Intermediate registration; or
- 3. For EMT-P recertification, either:
 - a. Attestation that the applicant:
 - i. Has completed continuing education required under subsection (C), and
 - ii. Has and will maintain for Department review documentation verifying completion of continuing education required under subsection (C); or
 - b. Current NREMT-Paramedic registration.
- C. An EMT-I or EMT-P required to complete continuing education requirements under subsections (B)(2)(a) or (B)(3)(a) shall complete 60 clock hours of continuing education, as follows:
 - 1. At least 7 clock hours through proficiency in cardiac pulmonary resuscitation and proficiency in advanced emergency cardiac life support;
 - 2. No more than 48 clock hours for completion of the Arizona ALS refresher;
 - 3. No more than 12 clock hours for passing the Arizona ALS refresher challenge examination;
 - 4. No more than 20 clock hours of training in a single subject covered in the Arizona EMT-I course, the Arizona EMT-P course, or the Arizona ALS refresher;

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5. No more than 20 clock hours of teaching in a single subject covered in the Arizona EMT-I course, the Arizona EMT-P course, or the Arizona ALS refresher;
6. No more than 20 hours of training related to skills, procedures, or treatments authorized under Article 8 of this Chapter;
7. No more than 20 hours of teaching related to skills, procedures, or treatments authorized under Article 8 of this Chapter;
8. No more than 20 hours of training in current developments, skills, procedures, or treatments related to the practice of emergency medicine or the provision of emergency medical services;
9. No more than 20 hours of participation in or attendance at meetings, conferences, presentations, seminars, or lectures designed to provide understanding of current developments, skills, procedures, or treatments related to the practice of emergency medicine or the provision of emergency medical services;
10. No more than 16 hours of training in advanced trauma life support; and
11. No more than 16 hours of training in pediatric emergency care.

R9-25-407. Extension to File an Application for EMT Recertification (Authorized by A.R.S. §§ 36-2202(A)(2), (A)(3) and (A)(6), 36-2202(G), and 36-2204(1), (4), (6) and (7))

- A. Before the expiration of a current certificate, an EMT who is unable to meet the recertification requirements in R9-25-406 because of personal or family illness, military service, or authorized federal or state emergency response deployment may apply to the Department in writing for one extension of time to file for recertification.
- B. The Department may grant one extension of time to file for recertification:
 1. For personal or family illness, for no more than 180 days; or
 2. For military service or authorized federal or state emergency response deployment, for the term of service or deployment plus 180 days.
- C. An individual applying for or granted an extension of time to file for recertification shall continue to be certified pursuant to the conditions of A.R.S. § 41-1092.11.
- D. An EMT who does not meet the recertification requirements in R9-25-406 within the extension period or has the application for recertification denied by the Department:

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1. Is not eligible to apply for recertification; and
2. May apply for certification pursuant to R9-25-404, or if applicable, R9-25-405.

R9-25-408. Requirements for Downgrading of Certification (Authorized by A.R.S. §§ 36-2202(A)(2), (A)(3) and (A)(6), 36-2202(G), and 36-2204(1) and (6))

A. A certified EMT-I or EMT-P who is not under investigation pursuant to A.R.S. § 36-2211 may apply for continued certification at a lower EMT level for the remainder of the certification period by submitting to the Department:

1. A written request containing:
 - a. The EMT's name, address, telephone number, date of birth, and social security number;
 - b. The lower EMT-level requested;
 - c. Attestation that the applicant has not committed an act or engaged in conduct that would warrant revocation of a certificate under A.R.S. § 36-2211;
 - d. Attestation that all information submitted is true and accurate; and
 - e. The applicant's signature and date of signature; and
2. Either:
 - a. A written statement from the EMT-I's or EMT-P's administrative medical director attesting that the EMT is able to perform at the lower level of certification; or
 - b. For an EMT-I or EMT-P applying for continued certification as an EMT-B, an Arizona BLS refresher certificate of completion or a BLS refresher challenge examination certificate of completion signed by the training program director assigned to the Arizona BLS refresher.

B. A certified EMT-I or EMT-P who is not under investigation pursuant to A.R.S. § 36-2211 may apply for recertification at a lower level pursuant to R9-25-406.

R9-25-409. Notification Requirements (Authorized by A.R.S. §§ 36-2202(A)(2), (A)(3) and (A)(6), 36-2204(1) and (6), and 36-2211)

A. No later than 10 ten days after the date an EMT's name legally changes, the EMT shall submit to the Department:

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1. A completed form provided by the Department containing:
 - a. The name under which the EMT is currently certified by the Department;
 - b. The EMT's address, telephone number, and social security number; and
 - c. The EMT's new name; and
 2. Documentation showing that the name has been legally changed.
- B. No later than 10 days after the date an EMT's address changes, the EMT shall submit to the Department a completed form provided by the Department containing:
1. The EMT's name, telephone number, and social security number; and
 2. The EMT's new address.
- C. An EMT shall notify the Department in writing no later than 10 days after the date the EMT:
1. Is incarcerated for any criminal conviction or is placed on parole for any criminal conviction, supervised release for any criminal conviction, or probation for any criminal conviction;
 2. Is convicted of a crime listed in R9-25-402(A)(2), a felony, or a misdemeanor involving moral turpitude in this state or any other state or jurisdiction;
 3. Is convicted of a misdemeanor identified in R9-25-403(A) in this state or any other state or jurisdiction;
 4. Has registration revoked or suspended by NREMT; or
 5. Has EMT certification, recertification, or licensure revoked or suspended in another state or jurisdiction.

R9-25-410. EMT Standards of Practice (Authorized by A.R.S. §§ 36-2202(A)(2), (A)(3) and (A)(6), 36-2204(1), (6) and (7), 26-2205, and 36-2211)

An EMT shall act as an EMT only:

1. As authorized under the EMT's scope of practice as identified under Article 8 of this Chapter; and
2. For an EMT required to have medical direction pursuant to A.R.S. Title 36, Chapter 21.1 and R9-25-201, as authorized under:
 - a. Treatment protocols, triage protocols, and communication protocols approved by the EMT's administrative medical director; and

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- b. Medical recordkeeping, medical reporting, and prehospital incident history report requirements approved by the EMT's administrative medical director.

R9-25-411. Enforcement Actions (Authorized by A.R.S. §§ 36-2202(A)(2) and (A)(3), 36-2204(1), (6) and (7), and 36-2211)

A. For purposes of A.R.S. § 36-2211(A)(1), unprofessional conduct is an act or omission made by an EMT that is contrary to the recognized standards or ethics of the EMT profession or that may constitute a danger to the health, welfare, or safety of a patient or the public, including but not limited to:

1. Impersonation of an EMT of a higher level of certification or impersonation of a health professional as defined in A.R.S. § 32-3201;
2. Permitting or allowing another individual to use the EMT certification for any purpose;
3. Aiding or abetting an individual who is not certified pursuant to this Chapter in acting as an EMT or in representing that the individual is certified as an EMT;
4. Engaging in or soliciting sexual relationships, whether consensual or nonconsensual, with a patient while acting as an EMT;
5. Physically or verbally harassing, abusing, threatening, or intimidating a patient or another individual while acting as an EMT;
6. Making false or materially incorrect entries in a medical record or willful destruction of a medical record;
7. Failing or refusing to maintain adequate records on a patient;
8. Soliciting or obtaining monies or goods from a patient by fraud, deceit, or misrepresentation;
9. Aiding or abetting an individual in fraud, deceit, or misrepresentation in meeting or attempting to meet the application requirements for EMT certification or EMT recertification contained in this Article, including the requirements established for:
 - a. Completing and passing a course provided by a training program; and
 - b. The NREMT examination process and NREMT registration process;
10. Providing false information or making fraudulent or untrue statements to the Department or about the Department during an investigation conducted by the Department;

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11. Being incarcerated for any criminal conviction or being placed on parole for any criminal conviction, supervised release for any criminal conviction, or probation for any criminal conviction;
 12. Being convicted of a misdemeanor identified in R9-25-403(A), which has not been absolutely discharged, expunged, or vacated;
 13. Having NREMT registration revoked or suspended by NREMT for material noncompliance with NREMT rules or standards; and
 14. Having EMT certification, recertification, or licensure revoked or suspended in another state or jurisdiction.
- B. Under A.R.S. § 36-2211, physical or mental incompetence of an EMT is the EMT's lack of physical or mental ability to provide emergency medical services as required under this Chapter.
- C. Under A.R.S. § 36-2211 gross incompetence or gross negligence is an EMT's willful act or willful omission of an act that is made in disregard of an individual's life, health, or safety that may cause death or injury.

R9-25-412. Special EMT-I Certification and Recertification Conditions (Authorized by A.R.S. §§ 36-2202(A)(2), (A)(3) and (A)(6), 36-2202(G), and 36-2204(1), (4) and (6))

- A. Under 404(B)(2)(a)(ii), "intermediate emergency medical technician level " means completion of training that meets or exceeds the training provided in the United States Department of Transportation, National Highway Traffic Safety Administration, EMT-Intermediate: National Standard Curriculum (1999), incorporated by reference in R9-25-307(A)(1).
- B. In this Article "NREMT-Intermediate registration" means EMT-Intermediate/99 registration granted by NREMT.
- C. For EMT-I recertification under R9-25-406, an applicant who does not hold current NREMT-Intermediate registration and who has not completed the Arizona EMT-I course or Arizona EMT-Intermediate Transition Course defined in Article 3 of this Chapter, shall satisfy the continuing education requirement in R9-25-406(C) by completing the Arizona EMT Intermediate Transition Course.
- D. This Section expires December 31, 2007.

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ARTICLE 12. TIME-FRAMES FOR DEPARTMENT APPROVALS

R9-25-1201. Time-frames (A.R.S. §§ 41-1072 through 41-1079)

- A. The overall time-frame described in A.R.S. § 41-1072(2) for each type of approval granted by the Department is listed in Table 1. The applicant and the Director may agree in writing to extend the overall time-frame. The substantive review time-frame may not be extended by more than 25% of the overall time-frame.
- B. The administrative completeness review time-frame described in A.R.S. § 41-1072(1) for each type of approval granted by the Department is listed in Table 1. The administrative completeness review time-frame begins on the date that the Department receives an application form or an application packet.
 - 1. If the application packet is incomplete, the Department shall send to the applicant a written notice specifying the missing document or incomplete information. The administrative completeness review time-frame and the overall time-frame are suspended from the postmark date of the written request until the date the Department receives a complete application packet from the applicant.
 - 2. When an application packet is complete, the Department shall send a written notice of administrative completeness.
 - 3. If the Department grants an approval during the time provided to assess administrative completeness, the Department shall not issue a separate written notice of administrative completeness.
- C. The substantive review time-frame described in A.R.S. § 41-1072(3) is listed in Table 1 and begins on the postmark date of the notice of administrative completeness.
 - 1. As part of the substantive review time-frame, the Department shall conduct inspections, investigations, or hold hearings required by law.
 - 2. If required under R9-25-403, the Department shall fix the period and terms of probation as part of the substantive review.

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3. During the substantive review time-frame, the Department may make one comprehensive written request for additional documents or information and it may make supplemental requests for additional information with the applicant's written consent.
 4. The substantive review time-frame and the overall time-frame are suspended from the postmark date of the written request for additional information or documents until the Department receives the additional information or documents.
 5. The Department shall send a written notice of approval to an applicant who meets the qualifications in A.R.S. Title 36, Chapter 21.1 and this Chapter for the type of application submitted.
 6. The Department shall send a written notice of denial to an applicant who fails to meet the qualifications in A.R.S. Title 36, Chapter 21.1, and this Chapter for the type of application submitted.
- D. If an applicant fails to supply the documents or information under subsections (B)(1) and (C)(3) within the number of days specified in Table 1 from the postmark date of the written notice or comprehensive written request, the Department shall consider the application withdrawn.
- E. An applicant that does not wish an application to be considered withdrawn may request a denial in writing within the number of days specified in Table 1 from the postmark date of a the written notice or comprehensive written request for documents or information under subsections (B)(1) and (C)(3).
- F. If a time-frame's last day falls on a Saturday, Sunday, or an official state holiday, the Department shall consider the next business day as the time-frame's last day.

Type of Application	Statutory Authority	Overall Time-frame	Administrative Completeness Time-frame	Time to Respond to Written Notice	Substantive Review Time-frame	Time to Respond to Comprehensive Written Request
ALS Base Hospital Certification (R9-25-208)	A.R.S. §§ 36-2201, 36-2202(A)(3), and 36-2204(5)	45	15	60	30	60

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Amendment of an ALS Base Hospital Certificate (R9-25-209)	A.R.S. §§ 36-2201, 36-2202(A)(3), and 36-2204(5) and (6)	30	15	60	15	60
Training Program Certification (R9-25-302)	A.R.S. § 36-2202(A)(3) and 36-2204(1) and (3)	120	30	60	90	60
Amendment of a Training Program Certificate (R9-25-303)	A.R.S. § 36-2202(A)(3) and 36-2204(1) and (3)	90	30	60	60	60
EMT Certification (R9-25-404)	A.R.S. §§ 36-2202(A)(2), (3), and (4), 36-2202(G), and 36-2204(1)	120	30	90	90	270
Temporary Nonrenewable EMT-B or EMT-P Certification (R9-25-405)	A.R.S. §§ 36-2202(A)(2), (3), and (4), 36-2202(G), and 36-2204(1) and (7)	120	30	90	90	60
EMT Recertification (R9-25-406)	A.R.S. §§ 36-2202(A)(2), (3), (4), and (6), 36-2202(G), and 36-2204(1) and (4)	120	30	60	90	60
Extension to File for EMT Recertification (R9-25-407)	A.R.S. §§ 36-2202(A)(2), (3), (4), and (6), 36-2202(G), and 36-2204(1) and (7)	30	15	60	15	60
Downgrading of Certification (R9-25-408)	A.R.S. §§ 36-2202(A)(2), (3), and (4), 36-2202(G), and 36-2204(1) and (6)	30	15	60	15	60
Initial Certificate of Necessity (R9-25-902)	A.R.S. §§ 36-2204, 36-2232, 36-2233, 36-2240	450 or less if no hearing is held	30	60	420 or less if no hearing is held	60
Provision of ALS Services (R9-25-902)	A.R.S. §§ 36-2232, 36-2233, 36-2240	450 or less if no hearing is held	30	60	420 or less if no hearing is held	60

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Transfer of a Certificate of Necessity (R9-25-902)	A.R.S. §§ 36-2236(A) and (B), 36-2240	450 or less if no hearing is held	30	60	420 or less if no hearing is held	60
Renewal of a Certificate of Necessity (R9-25-904)	A.R.S. §§ 36-2233, 36-2235, 36-2240	90	30	60	60	60
Amendment of a Certificate of Necessity (R9-25-905)	A.R.S. §§ 36-2232(A)(4), 36-2240	450 or less if no hearing is held	30	60	420 or less if no hearing is held	60
Initial Registration of a Ground Ambulance Vehicle (R9-25-1001)	A.R.S. §§ 36-2212, 36-2232, 36-2240	90	30	60	60	60
Renewal of a Ground Ambulance Vehicle Registration (R9-25-1001)	A.R.S. §§ 36-2212, 36-2232, 36-2240	90	30	60	60	60
Establishment of Initial General Public Rates (R9-25-1101)	A.R.S. §§ 36-2232, 36-2239	450 or less if no hearing is held	30	60	420 or less if no hearing is held	60
Adjustment of General Public Rates (R9-25-1102)	A.R.S. §§ 36-2234, 36-2239	450 or less if no hearing is held	30	60	420 or less if no hearing is held	60
Contract Rate or Range of Rates Less than General Public Rates (R9-25-1103)	A.R.S. §§ 36-2234, 36-2239	450 or less if no hearing is held	30	60	420 or less if no hearing is held	60
Ground Ambulance Service Contracts (R9-25-1104)	A.R.S. §§ 36-2232	90	30	60	60	60
Ground Ambulance Service Contracts with Political Subdivisions (R9-25-1104)	A.R.S. §§ 36-2232, 36-2234 (K)	30	15	15	15	Not Applicable

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Subscription Service Rate (R9- 25-1105)	A.R.S. § 36- 2232(A)(1)	450 or less if no hearing is held	30	60	420 or less if no hearing is held	60
Air Ambulance Registration Certificate (R9-13- 1101)	A.R.S. § 36-2212	90	30	60	60	60
Air Ambulance Registration Certificate Renewal (R9-13-1101)	A.R.S. § 36-2212	90	30	60	60	60